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SERIAL NUMBER 09/941,969	FILING DATE 08/28/2001 RULE	CLASS 455	GROUP ART UNIT 2645	ATTORNEY DOCKET NO. 5642.P002
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APPLICANTS

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**** CONTINUING DATA *******
 This appln claims benefit of 60/292,836 05/21/2001

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 10/02/2001**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
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 56188
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TITLE
 Method and system for completing incomplete addressing data sent to a communication device

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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